PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/564,823			ing Date 18/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (\neg	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (0)	
┢	SEARCH FEF	or (c))	N/A		N/A		N/A		1	N/A	i e	
H	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), r TAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =		
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *			ı	x s =			x s =		
	CFR 1.16(h)) APPLICATION SIZE (37 CFR 1.16(s))	FEE shee	If the specification and drawings exceed sheets of paper, the application size fee is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof.									
Ļ	35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								ļ			
Щ	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))								ı	<u> </u>		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								J	TOTAL		
	APPI	(Column 2)		OTHER THAN SMALL ENTITY OR SMALL ENTITY								
AMENDMENT	01/21/2009	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR	* 44	Minus	PAID FOR	= 1	ı	x s =		OR	X \$52=	52	
	1.16(i)) Independent (37 CFR 1.16(h))	• 6	Minus	***6	= 0	ı	x s =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(a))								-		Ť	
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	52	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus		-	l	x \$ =		OR	x \$ =		
	Independent (37 CFR 1,16(h))		Minus	***			x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))]			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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